

As a below named inventor, I hereby declare that:

### TYPE OF DECLARATION

This declaration is of the type:

X original design supplemental
national stage of PCT
divisional
continuation
continuation-in-part (CIP)

### INVENTORSHIP IDENTIFICATION

My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

### TITLE OF INVENTION

**DECOY WITH MOVING BODY PARTS** 

SPECIFICATION IDENTIFICATION

The specification of which is attached hereto.

### ACKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37, Code of Federal Regulations, 1.56, and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable examiner would consider it important in deciding whether to allow the application to issue as a patent.

## 

COUNTRY

### PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent of inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

X	no such applications have been filed.
	such applications have been filed as follows.

# PRIOR FOREIGN/PCT APPLICATIONS FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS APPLICATION AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119

DATE OF FILING

**PRIORITY** 

APPLICATION NUMBER

ALL FOREIGN APPLICATION (6 MONTHS FOR DES	ON(S), IF ANY FILED MOF IGN) PRIOR TO THIS U.S.	
I hereby claim the benefit under T application(s) listed below and, insofar is not disclosed in the prior United State of Title 35, United States Code, 112, defined in Title 37, Code of Federal Re of this application, namely, informati examiner would consider it important patent, which occurred between the finternational filing date of this application.	as the subject matter of each test application in the manner I acknowledge the duty to degulations, 1.56(a), and which on where there is a substant tin deciding whether to allow the prior applications and the prior applications.	of the claims of this application provided by the first paragraph lisclose material information as h is material to the examination ial likelihood that a reasonable ow the application to issue as a
APPLICATION SERIAL NO.	FILING DATE	<u>STATUS</u>

## POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Michael R. Friscia

Reg. No. 33,884

Send correspondence to:

Direct telephone calls to:

Michael R. Friscia FRISCIA & NUSSBAUM One University Plaza Hackensack, New Jersey 07601 Michael R. Friscia (201) 498-9800

# 

### **DECLARATION**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

## SIGNATURE(S)

Full name of sole or first inv	entor:	,				
Greg First name  MMMM Ham Inventor's signature	Im.	<u>Л</u> .І.	Samaras Last name  7-14-98  Date			
Country of Citizenship US						
Residence 35-24 209th Street, Bayside, New York 11361						
Post Office Address 35-24 2	09th Street, Bays	ide, New Yo	rk 11361			
Full name of second joint in  First name	ventor, if any:  M.I.		Last name			
Inventor's signature		Date				
Country of Citizenship						
Residence						
Post Office Address	·					
	This declaration	n ends with tl	his nage			

f/dec301.389

Attorney's Docket No.:

389301

Applicant:

**Greg Samaras** 

For:

**DECOY WITH MOVING BODY PARTS** 

# VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS (37 CFR 1.0(f) AND 1.27(b)) - INDEPENDENT INVENTOR

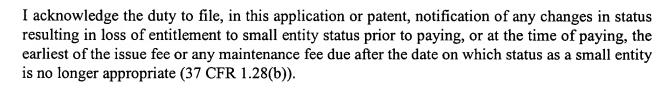
As a below named inventor, I hereby declare that I qualify as an independent inventor as defined in 37 CFR 1.9(c) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, to the Patent and Trademark Office with regard to the above-entitled invention described in the specification filed herewith.

I have not assigned, granted, conveyed or licensed and am under no obligation under contract or law to assign, grant, convey or license, any rights in the invention to any person who could not be classified as an independent inventor under 37 CFR 1.9(c) if that person had made the invention, or to any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

X no such person, concern, or organization
_ persons, concerns or organizations listed below

Full name:		
Address:		
individual	small business concern	nonprofit organization
Full name:		
Address:		
individual	small business concern	nonprofit organization
Full name:		
Address:		
individual	small business concern	nonprofit organization



I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Greg Samaras

Name of inventor

Signature of inventor

Date: 1-14-98

f/sment301.389